

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/049792 FILING DATE 14 FEB 2002

APPLICANT(S) *Arte*

CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND. DEP. IND. DEP. IND. DEP. IND. DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	/						51
2		/					52
3	/						53
4		/					54
5		/					55
6		/					56
7		/					57
8		/					58
9		/					59
10		/					60
11		/					61
12		/					62
13		/					63
14		/					64
15		/					65
16		/					66
17		/					67
18		/					68
19		/					69
20	/						70
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39							89
40							90
41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
TOTAL IND.	4						TOTAL IND.
TOTAL DEP.	17						TOTAL DEP.
TOTAL CLAIMS	21						TOTAL CLAIMS